



STATEMENT FOR THE RECORD

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BEFORE THE

UNITED STATES HOUSE OF REPRESENTATIVES
COMMITTEE ON HOMELAND SECURITY

“PROTECTING THE PROTECTORS: ENSURING THE HEALTH AND SAFETY OF OUR
FIRST RESPONDERS IN THE WAKE OF CATASTROPHIC DISASTERS”

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Mr. Chairman, Ranking Member King, and Members of the Committee:

I am Dr. Jon Krohmer, the Deputy Assistant Secretary for Health Affairs and Deputy Chief Medical Officer within the Department of Homeland Security. Let me begin by thanking you for the opportunity to testify before the Committee on these critical issues related to ensuring the health and safety of our nation's first responders. In addition, on behalf of Secretary Chertoff, Dr. Runge – the Acting Assistant Secretary and the Chief Medical Officer - and the rest of the Department, thank you for your continued leadership and willingness to work with the Department to address many of the issues facing our nation's security.

My office, the Office of Health Affairs, serves as the Department's principal agent for all medical and public health matters and is responsible for ensuring a unified program for medical support of the Department's missions, including the integration of occupational medicine and workforce protection principles into the occupational health and safety programs of DHS and its components. Importantly, this includes ensuring that these principles are applied whenever DHS personnel are deployed in a response role during any critical incident.

One point that I would like to make at the outset is that while today's hearing is focused on "first responders," our goal in the Office of Health Affairs is to work hand-in-hand with our safety and environmental sciences colleagues to have a comprehensive approach to health and safety for employees of the Department, from those who are working in a climate controlled office, to those protecting our borders and airports, to those who are deploying on no-notice to the worst imaginable disasters, both natural and man-made. Importantly, my role here today is not to discuss the overall approach to health and safety of first responders nationally, but to focus on how the Department of Homeland Security is working to ensure the health and safety of early responders from the component agencies of DHS, including TSA, CBP, Coast Guard, FEMA and others.

Within the emergency response community, it is an axiom that we must "care for those who care for others." Ensuring scientifically sound, compassionate, and comprehensive health and safety support for emergency responders is a priority for all government agencies involved in emergency response. In the aftermath of the attacks of September 11th and Hurricane Katrina, emergency personnel and others involved in the response effort were exposed to a number of environmental contaminants and irritants. These were, obviously, large scale events for the responder community, and even for the greater public health community, but, as you know, today we must think about the unthinkable. Initial safety assessments and the safety measures applied to incident management of those events were not what they would be today, based on the lessons we have learned from those events. We have learned a great deal from those events, both in terms of how we protect our first responders and in the long-term management of those involved, but we still have progress to make. My colleagues testifying today will detail many of the lessons learned and actions that have been taken in response to those events. I have been asked to discuss how DHS has taken those lessons-learned and what is being done now to ensure that responder health and safety advances are moving forward.

Let me also add that our DHS "first responder" role is actually fairly minimal, as we know that, in general, the first people on site in any incident will be the local and state emergency services personnel. However, once assistance from the Federal Government is requested DHS will deploy

"early responder" personnel to respond to incidents that are still in flux and do not have the usual safety and support systems in place. Consequently, we must have the same concerns for these "early responders" that we do for the local community's first responders.

DHS occupational safety and health programs, including those supporting personnel who respond to major disasters and other catastrophies, have historically been a function of management because they directly affect the efficiency and productivity of the workforce and because they are often seen primarily as responsive to laws and regulations related to the Occupational Safety and Health Act. These functions are managed primarily by the safety offices within the individual operating components. At the Department level, we have two offices that work in close coordination to provide policies, requirements, standards and metrics to support the safety and health functions at the component level. In addition to the Office of Health Affairs, the Office of Safety and Environmental Programs, or "OSEP," provides guidance, oversight and, importantly, advocacy for the safety and health needs of the components. Collectively, our role is to facilitate and coordinate the occupational health issues across components. It is a combination of oversight management (e.g. ensuring OSHA rules are applied in all situations) and the more recently expanding functions to improve specific first responder safety across all components.

Within the Office of Health Affairs, we have recently established the Office of Component Services to focus on optimizing health related services and consultations for component agencies of DHS. I would like to take a few moments to outline the objectives of the office that bear on the health and safety of our response personnel.

The Office of Component Services will partner with OSEP to ensure that occupational medicine principles are incorporated. This partnership, with each office bringing specific complimentary skill-sets to the program, increases program benefits throughout the Department. Additionally, by placing the head of the Component Services office as a direct report to the Assistant Secretary for Health Affairs, we are ensuring that these critical safety and health issues have high visibility and have a well positioned advocate within DHS.

The first new position we have filled within Component Services is a Director for Workforce Health Promotion and Wellness, who will directly address the concerns of our response personnel. Staffed with an Industrial Hygienist and supported by the physician staff of the Office, this position will address such issues as medical and physical recommendations for deployments to critical incidents, including vaccination and preventive medicine services, as well as the health and safety training requirements for responders. Additionally, in conjunction with OSEP, this branch will be well-positioned to develop standards and policies for environmental and safety assessments of areas to which DHS personnel are deployed, and the resulting requirements for personal protective equipment, or PPE, for our personnel.

Over the coming weeks, we will also be bringing on board an Occupational Medicine Physician who will work with the Human Capital Office and the individual DHS components to provide medical guidance and recommendations for the physical and medical preparation of responders and to develop plans for medical and psychological assistance for personnel during and after deployments.

Direct medical support for DHS personnel, particularly those responding to critical situations, is also a primary consideration in the event that prevention efforts are overwhelmed in a disaster

situation. In general, medical systems established in a disaster setting will take care of both victims and responders. At the same time, however, we recognize that there will be certain intensive operations which are unique to responders, including aviation response, wilderness rescue, toxic environments, and so on. We are in the process of hiring a Director for Emergency Medical Services who will have the specific goal of ensuring that the operational personnel of the department, in either a law enforcement role, or a responder role, have the right medical support services in place to give them the confidence that DHS will do everything in our power to take care of them medically.

Finally, I would like to note that we also recognize the need for horizontal and vertical integration of response to early responder health and safety issues. This response is not just a local issue, nor a state issue, nor an HHS issue, nor a DHS issue. Instead, ensuring the safety of our first responders is a shared obligation that the entire response community has to those who put themselves in harm's way for the betterment and safety of others. We will always strive to work across the federal government and through our state, territorial, tribal, and local partners to ensure that there is an integrated approach to ensuring the health and safety of all first responders.

Mr. Chairman, I appreciate the opportunity to have outlined for you today the importance that the Department of Homeland Security places on ensuring the health and safety of our response personnel and look forward to answering any questions you may have on these matters.